

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | JA | | 11/13/01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | A-S | 943 | 11-23-1 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | 4 | 13 | |
| 2 | 18 | 20 | |
| 3 | 21 | 22 | |
| 4 | 23 | 24 | |
| 5 | 25 | 26 | |
| 6 | 27 | 28 | |
| 7 | 29 | 30 | |
| 8 | 31 | 32 | |
| 9 | 33 | 34 | |
| 10 | 35 | 36 | |
| 11 | 37 | 38 | |
| 12 | 39 | 40 | |
| 13 | 41 | 42 | |
| 14 | 43 | 44 | |
| 15 | 45 | 46 | |
| 16 | 47 | 48 | |
| 17 | 49 | 50 | |
| 18 | 51 | 52 | |
| 19 | 53 | 54 | |
| 20 | 55 | 56 | |
| 21 | 57 | 58 | |
| 22 | 59 | 60 | |
| 23 | 61 | 62 | |
| 24 | 63 | 64 | |
| 25 | 65 | 66 | |
| 26 | 67 | 68 | |
| 27 | 69 | 70 | |
| 28 | 71 | 72 | |
| 29 | 73 | 74 | |
| 30 | 75 | 76 | |
| 31 | 77 | 78 | |
| 32 | 79 | 80 | |
| 33 | 81 | 82 | |
| 34 | 83 | 84 | |
| 35 | 85 | 86 | |
| 36 | 87 | 88 | |
| 37 | 89 | 90 | |
| 38 | 91 | 92 | |
| 39 | 93 | 94 | |
| 40 | 95 | 96 | |
| 41 | 97 | 98 | |
| 42 | 99 | 100 | |
| 43 | 101 | 102 | |
| 44 | 103 | 104 | |
| 45 | 105 | 106 | |
| 46 | 107 | 108 | |
| 47 | 109 | 110 | |
| 48 | 111 | 112 | |
| 49 | 113 | 114 | |
| 50 | 115 | 116 | |
| 51 | 117 | 118 | |
| 52 | 119 | 120 | |
| 53 | 121 | 122 | |
| 54 | 123 | 124 | |
| 55 | 125 | 126 | |
| 56 | 127 | 128 | |
| 57 | 129 | 130 | |
| 58 | 131 | 132 | |
| 59 | 133 | 134 | |
| 60 | 135 | 136 | |
| 61 | 137 | 138 | |
| 62 | 139 | 140 | |
| 63 | 141 | 142 | |
| 64 | 143 | 144 | |
| 65 | 145 | 146 | |
| 66 | 147 | 148 | |
| 67 | 149 | 150 | |

5731 945

5867 191

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)